Fact Sheet Increase in Beneficiary Contact

County Playbook: NC Medicaid Managed Care

Potential for Higher Call Volumes & Foot Traffic at DSS Offices

Change almost always prompts questions. Many Medicaid beneficiaries will turn to their local Department of Social Services (DSS) office to get answers. As a result, DSS offices will likely experience higher call volumes from beneficiaries. Due to the COVID-19 pandemic, foot traffic may be limited. You can anticipate when increased volumes are likely based upon the Medicaid Transformation timeline.

The Introduction to Medicaid Transformation – Part 2: Enrollment & Timelines Fact Sheet outlines some of the key milestones most of our beneficiaries will experience in the transition to NC Medicaid Managed Care. We recommend that DSS offices prepare for an increase in calls and/or visits around the time these milestones occur. Please reference the table below for the approximate dates. We have also included example scenarios to explain why beneficiaries may contact DSS offices (or other community partners) during this time.

ĺ	MILESTONE	TIMELINE	EXAMPLE SCENARIO
		Beginning 3/1/2021 (all should be mailed within 10 business days)	Joe receives a letter from NC Medicaid explaining that he and his family need to enroll in a health plan. Instead of calling the toll-free number on the form, he calls his caseworker to make sure this is really something he has to do. DSS Action: Caseworker provides basic NC Medicaid Managed Care
		Designing AIAEI2024 (all should be	information and directs Joe to contact the Enrollment Broker.
		Beginning 4/15/2021 (all should be mailed within 10 business days)	Angie receives a postcard from NC Medicaid reminding her about open enrollment. She remembers seeing something about that a few weeks ago but misplaced her paperwork. She calls the main number for her local DSS office to see if they can help. DSS Action: Caseworker informs Angie that she has until May 14, 2021 to
ļ		Beginning 5/15/2021	choose a health plan and directs Angie to contact the Enrollment Broker. Lola received mail from NC Medicaid about enrolling in a health plan, but
	Auto Enrollment	Health plans will mail Welcome Packets to their members within six business days of enrollment.	she ignored it. She is auto-enrolled in a health plan after open enrollment ends. She then receives mail from one of the health plans containing a handbook and an ID card. She calls her Medicaid caseworker to ask if she still has Medicaid.
			DSS Action: Caseworker informs Lola that she still has Medicaid, but health care services are now provided by the health plan. She directs Lola

^{*}Dates are approximate and subject to change



to contact the Enrollment Broker if she wishes to change her health plan.

RETURNED MAIL

Most beneficiaries will receive information by mail from the Enrollment Broker and from their health plan. DSS offices should not see an increase in returned mail due to Medicaid Transformation.

- Mail from the Enrollment Broker will be branded as "NC Medicaid" but will have the return address for the Enrollment Broker. This includes:
 - Enrollment Packets
 - Reminder Postcards
 - Notices related to Managed Care status changes and disenrollment
- Mail from the health plans will be branded with the health plan's name and logo and will have the return address for that health plan. This includes:
 - Welcome Packets, Member Handbooks, and ID cards*
 - * NC Medicaid will send ID cards for EBCI Tribal Option members.
 - Provider Directory
 - How to access care management services

Returned mail will be compiled by the Enrollment Broker and the health plans and shared with NC Medicaid. More information will be coming soon about how NC Medicaid will share out-of-date addresses with local DSS offices.

Fact Sheets will be updated periodically with new information. Created 2/9/2021. For more information, please visit https://www.medicaid.ncdhhs.gov/transformation.